| PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003                |   |   |                                    |                                  |              |                  |       |                   |  |        | 1812                | 3                      |
|---|---|---|------------------------------------|----------------------------------|--------------|------------------|-------|-------------------|--|--------|---------------------|------------------------|
| CLAIMS ÀS FILED - PART I<br>(Column 1) (Column 2)                                     |   |   |                                    |                                  |              |                  |       | WALL E            | NTITY  | OR     | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS  |   |   | 77                                 |                                  |              |                  |       | RATE              | FEE  | 1      | RATE                | FEE                    |
| FOR   |   |   | NUMBER FILED                       |                                  | NUMB         | NUMBER EXTRA     |       | ASIC FEI          | 375.00   | OR     | Basic Fee           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 77 minus 20=                       |                                  | • 57         |                  | Γ     | X\$ 9=            |  | OB     | X\$18=              | 1026                   |
| INDEPENDENT CLAIMS  |   |   | 6 minus 3 =                        |                                  | 3            |                  | X42=  |                   | <del> </del>                                     |        | X84=                | 852                    |
| MULTIPLE DEPENDENT CLAIM P  |   |   | RESENT                             |                                  |              |                  |       |                   | <del>                                     </del> | OR     |                     | 752                    |
| * If  | the difference  | in column 1 is                            | less than zero, enter "0" in colum |                                  |              | oluma 2          | Ĺ     | +140=             |  | OR     | +280=               | <u> </u>               |
| 5-2-05 CLAIMS AS AMENDED - PART II  |   |   |                                    |                                  |              |                  |       | TOTAL             | L  | OR     | TOTAL               | 2c28                   |
| (Column 1) (Column 2) (Column 3)  |   |   |                                    |                                  |              |                  |       | SMALL             | ENTITY   | OR     | OTHER<br>SMALL I    |                        |
| AMENDMENT A   | ٠.  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUMI<br>PREVIO<br>PAID I | BER<br>JUSLY | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE                           |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | · 28                                      | Minus                              | - 7                              | 77           | 9                |       | X\$ 9=            |  | OR     | X\$18=              |                        |
|   | Independent   | · /                                       | Minus                              |                                  | 2            | =                | T     | X42=              |  | OR     | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                  |              |                  |       | +140=             | ·  | OR     | +280=               |                        |
|   |   |   |                                    |                                  |              |                  |       | TOTAL             |  | OR     | TOTAL<br>ADDIT. FEE |                        |
|   | 17/15   | (Column 1)                                |                                    | (Colum                           |              | (Column 3)       | -     |                   |  |        |                     |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUME<br>PREVIO<br>PAID I | BER          | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE                           |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | · 28                                      | Minus                              | * 6                              | 28           | 5                |       | X\$ 9=            |  | OR     | X\$18=              |                        |
|   | Independent   | NTATION OF MI                             | Minus                              | ENIDENT                          | CLAIM        | -                | Γ     | X42=              |  | OR     | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                    |                                  |              |                  |       | +140=             |  | OR     | +280=               |                        |
|   |   |   |                                    |                                  |              |                  | AD    | TOTAL<br>DIT. FEE |  | OR     | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |   |   |                                    |                                  |              |                  |       |                   |  |        |                     |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                                    | HIGH<br>NUME<br>PREVIO<br>PAID I | BER<br>USLY  | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE                           |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   |   | Minus                              | **                               |              | 2                | Γ     | X\$ 9=            |  | OR     | X\$18=              |                        |
|   | Independent   | *   | Minus                              | ***                              |              | c .              |       | X42=              |  | OR     | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                                    |                                  |              |                  |       |                   |  |        |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |                                    |                                  |              |                  |       |                   |  |        |                     |                        |
|   | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                    |                                  |              |                  |       |                   |  |        |                     |                        |
|   | ing uthestum  | uer rreviously Pai                        | o ror (lousion                     | unaepende                        | ani) is the  | righest number   | tound | in the ap         | propriate box                                    | in col | umn 1.              |                        |

**Application or Docket Number**